

107TH CONGRESS  
1ST SESSION

# H. R. 1928

To amend title XVIII of the Social Security Act to provide for full payment rates under Medicare to hospitals for costs of direct graduate medical education of residents for residency training programs in specialties or subspecialties which the Secretary of Health and Human Services designates as critical need specialty or subspecialty training programs.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 21, 2001

Mr. STARK (for himself, Mr. RANGEL, Mr. MATSUI, Mr. McDERMOTT, Mr. LEWIS of Georgia, Mrs. THURMAN, Mr. WAXMAN, Mr. BONIOR, Mr. FROST, Ms. KAPTUR, Mr. FILNER, Mr. HILLIARD, Mr. RUSH, Mr. BENTSEN, Mr. CUMMINGS, Ms. JACKSON-LEE of Texas, Mr. DAVIS of Illinois, and Ms. BERKLEY) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to provide for full payment rates under Medicare to hospitals for costs of direct graduate medical education of residents for residency training programs in specialties or subspecialties which the Secretary of Health and Human Services designates as critical need specialty or subspecialty training programs.

1 *Be it enacted by the Senate and House of Representa-*  
 2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Medicare Critical Need  
 5 GME Protection Act of 2001”.

6 **SEC. 2. FULL FTE PAYMENT FOR RESIDENTS IN CRITICAL**  
 7 **NEED SPECIALTY OR SUBSPECIALTY TRAIN-**  
 8 **ING PROGRAMS.**

9 (a) TREATMENT AS INITIAL RESIDENCY PERIOD.—

10 (1) IN GENERAL.—Section 1886(h)(5)(F) of  
 11 the Social Security Act (42 U.S.C.  
 12 1395ww(h)(5)(F)) is amended—

13 (A) in clause (i)—

14 (i) by striking “clause (ii)” and in-  
 15 serting “clauses (ii) and (iii)”; and

16 (ii) by striking “and” at the end;

17 (B) in clause (ii), by striking the period at  
 18 the end and inserting “, and”; and

19 (C) by inserting after clause (ii) the fol-  
 20 lowing new clause:

21 “(iii) subject to the requirement for  
 22 budget neutrality under paragraph (7), a  
 23 period of years during which an individual  
 24 is in a residency training program des-  
 25 ignated by the Secretary as a critical need

1 specialty or subspecialty, as defined in sub-  
 2 paragraph (K)(i), shall be treated as part  
 3 of the initial residency period, but shall not  
 4 be counted against any limitation on the  
 5 initial residency period.”.

6 (2) DETERMINATION OF CRITICAL NEED SPE-  
 7 CIALTY OR SUBSPECIALTY.—Section 1886(h)(5) of  
 8 such Act (42 U.S.C. 1395ww(h)(5)) is amended by  
 9 adding at the end the following new subparagraph:

10 “(K) CRITICAL NEED SPECIALTY.—

11 “(i) DEFINITION.—The term ‘critical  
 12 need specialty or subspecialty’ means a  
 13 specialty or subspecialty designated by the  
 14 Secretary under this subparagraph with a  
 15 current or imminent critical shortage of  
 16 physicians.

17 “(ii) CRITERIA.—For purposes of des-  
 18 ignating a critical need specialty or sub-  
 19 specialty under this subparagraph, the Sec-  
 20 retary shall prescribe criteria for deter-  
 21 mining critical shortages of physicians or  
 22 residents in approved medical residency  
 23 training programs. The Secretary shall  
 24 publish in the Federal Register the criteria  
 25 established under this clause and the form

1 and manner by which data are submitted  
2 for the Secretary's review under this sub-  
3 paragraph.

4 “(iii) PERIOD OF DESIGNATION.—

5 “(I) IN GENERAL.—A designa-  
6 tion of a critical need specialty or sub-  
7 specialty under this subparagraph  
8 shall apply beginning with the first  
9 residency training year in which it is  
10 effective and shall continue until the  
11 first residency training year for which  
12 Secretary determines the specialty or  
13 subspecialty does not meet the criteria  
14 for designation as a critical need spe-  
15 cialty or subspecialty.

16 “(II) REPORT.—If the Secretary  
17 determines that a specialty or sub-  
18 specialty no longer meets the criteria  
19 for being a critical need specialty or  
20 subspecialty, the Secretary shall sub-  
21 mit a report to Congress describing  
22 the reasons for discontinuing the des-  
23 ignation.”.

1 (b) MAINTAINING BUDGET NEUTRALITY.—Section  
2 1886(h) of such Act (42 U.S.C. 1395ww(h)) is amended  
3 by adding at the end the following new paragraph:

4 “(7) BUDGET NEUTRALITY ADJUSTMENT FOR CRIT-  
5 ICAL NEED SPECIALTY OR SUBSPECIALTY DESIGNA-  
6 TION.—If the Secretary designates a critical need specialty  
7 or subspecialty for a residency training year, the Secretary  
8 shall make a proportional adjustment to payment amounts  
9 under this subsection for such residency training year so  
10 that the aggregate of the payments under this subsection  
11 for the portions of such residency training year occurring  
12 in any fiscal year shall equal the aggregate payments that  
13 would have been made under this subsection for such por-  
14 tions of the fiscal year if the Secretary had not designated  
15 a critical need specialty or subspecialty.”.

16 (c) EFFECTIVE DATE.—The amendments made by  
17 this section shall apply with respect to payments under  
18 section 1886(h) of the Social Security Act (42 U.S.C.  
19 1395ww(h)) made for periods in a residency training pro-  
20 gram for residency training years beginning on or after  
21 on or after July 1, 2002.

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